

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SL</i>	<i>11</i>	<i>4/18/8</i>
O.I.P.E. CLASSIFIER	<i>SL</i>	<i>72376</i>	<i>5/17/8</i>
FORMALITY REVIEW			<i>8-15-8</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

☒ Rejected  
☐ Allowed  
☐ (Through numeral) Canceled  
☐ Restricted  
☐ Non-elected  
☐ Interference  
☐ Appeal  
☐ Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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